

# AFFIDAVIT OF OWNERSHIP AND INDEMNITY AGREEMENT

The undersigned, being first duly sworn on oath, states:

1. That I am the owner of unclaimed funds presently being held by Fond du Lac County and identified in the public notice by the Treasurer.
2. That proof of my ownership of such funds arises from the following facts:

**Check #** \_\_\_\_\_ **Check Date** \_\_\_\_\_ **Amount \$** \_\_\_\_\_

3. That I hereby request Fond du Lac County to pay such unclaimed funds to me and hereby agree to completely indemnify Fond du Lac County against any claim to such funds which might be made by any person, in the event that person is determined to be the rightful owner of such funds.

\_\_\_\_\_  
**Claimant's Signature**

\_\_\_\_\_  
**Date**

**\*Copy of Photo Identification must be attached.\***

## **Current Contact Information:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

**Subscribed and sworn to and before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_**

\_\_\_\_\_  
**Notary Public Fond du Lac County  
My Commission Expires: \_\_\_\_\_**

## **For Office Use Only - County Treasurer**

### **Acknowledgement:**

\_\_\_\_\_  
**Office Representative**

\_\_\_\_\_  
**Originating Department/Municipality**

\_\_\_\_\_  
**Brenda A Schneider, County Treasurer**

### **Photo Identification attached (unexpired):**

\_\_\_\_ *Driver's License*    \_\_\_\_ *Passport*

\_\_\_\_ *State-Issued ID*    \_\_\_\_ *(State)*

\_\_\_\_ *Military ID*    \_\_\_\_ *Veteran's ID*

\_\_\_\_ *Refund by check*    \_\_\_\_ *Petty Cash*